PTO/SB/82 (09-03)
Approved for use through 11/30/2005. OMB 0651-0035
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

REVOCATION OF POWER OF

ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF **CORRESPONDENCE ADDRESS**

Application Number	09/910,669
Filing Date	July 20, 2001
First Named Inventor	Reardon, Matthew J.
Group Art Unit	2173
Examiner Name	
Attorney Docket Number	482.0003

I hereby revoke all previous powers of attorney or authorization of agent given in the above-identified application:					
A power of attorney or Authorization of Agent is submitted herewith.					
OR					
X I hereby appoint the	practitioners associated with the	e Customer Numbe	er: 27370		
X Please change the correspondence address for the above-identified application to:					
X The address asso with Customer No	ociated 27370 umber			FEB 1 8 2	2004
OR				Technology Cer	nter 2100
Firm <i>or</i> Individual Name					
Address					
Address				· · · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·
City		State		Zip	
Country		Ir I			
Telephone		Fax		<u> </u>	
I am the: Applicant/I	nyontor				
Applicant/I	iiveilloi.				
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)					
SIGNATURE of Applicant or Assignee of Record					
Name Matthew	J. Reardon	-			
Signature (Random)					
Date 1/6	·/····································	Telephoi	ne 205-	266-7092	-
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are					
required. Submit multiple forms if more than one signature is required, see below*.					
*Total of	forms are submitted.				

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/82 (09-03)

Approved for use through 11/30/2005. OMB 0651-0035 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS

Application Number	09/910,669
Filing Date	July 20, 2001
First Named Inventor	Francis, Gregory S.
Group Art Unit	2173
Examiner Name	
Attorney Docket Number	482.0003

I hereby revoke	all previou	us powers of attorney or authorization of	of agent give	en in the above-identified application:
A power of	of attorney	or Authorization of Agent is submitted	herewith.	
OR				•
X I hereby a	appoint the	practitioners associated with the Cust	omer Numb	per: 27370 - 1,5465 - 1,5465 - 1,5465 - 1,5465 - 1,5465
X Please ch	nange the	correspondence address for the above	-identified a	RECEIVED
with C	Customer N	pociated 27370 umber		FEB 1 8 2004
OR				Technology Center 2100
Firm <i>or</i> Individual		en Maria de Caralle de La grandia de Caralle d La grandia de Caralle		SILLEGE CHROLI HARDE COMPANION COMPA
Address				A Company Comp
Address		· · · · · · · · · · · · · · · · · · ·		
City	,#1	The state of the s	State	Zip
Country		· · · · · · · · · · · · · · · · · · ·	1_ 1	
Telephone	_		Fax	
I am the:	Applicant/I	nventor.		
	Assianee d Statement	of record of the entire interest. See 37 under 37 CFR 3.73(b) is enclosed. (F	CFR 3.71. orm PTO/SE	B/96)
		SIGNATURE of Applicant of	r Assignee	of Record
Name	Gregory	S. Francis		The second second
Signature	Bro	and S. Farris		
Date	12	Jonuary 2004	Telepho	ne 765-414-6934
		ne inventors or assignees of record of forms if more than one signature is rec		·
Total of		forms are submitted.	*	
5 1 K K				

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35.U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/82 (09-03)

Approved for use through 11/30/2005. OMB 0651-0035 U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

REVOCATION OF POWER OF
ATTORNEY WITH NEW POWER OF
ATTORNEY AND CHANGE OF
CORRESPONDENCE ADDRESS

Application Number	09/910,669
Filing Date	July 20, 2001
First Named Inventor	Francis, Gregory S.
Group Art Unit	2173
Examiner Name	
Attorney Docket Number	482.0003

I hereby revoke	all previou	s powers of attorney or	authorization of a	gent give	en in the above	e-identified applic	ation:	: -
A power of	of attorney	or Authorization of Age	nt is submitted he	rewith.				**
OR								••
	ppoint the	practitioners associate	d with the Custom	er Numb	er: 27370			i karana Karana
The a	ange the oddress assocustomer Nu	correspondence addres	s for the above-ide	entified a	pplication to:	RECE	EIVEI 8 2004)
OR				_		Technology		100
Firm <i>or</i> Individual	Name	20.					10	or many the part
Address								
Address								
City				State		Zip	· · · · · · · · · · · · · · · · · · ·	
Country							- · · · -	
Telephone				Fax				
I am the:	Applicant/I	nventor.						
		of record of the entire in under 37 CFR 3.73(b) i			3/96)		•	****** *****
		SIGNATURE	of Applicant or A	ssignee	of Record	•	· ·	
Name	Clarence	E. Rash				·		
Signature	Li	5.	p/s					
Date	15	Du 20-3	-	Telepho	ne 33	7-255 ~	6814	
_		ne inventors or assigned forms if more than one				representative(s)	are .	1 12 3 4
*Total of		forms are submitted.						

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.